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10/009476 JC18 Rec'd PCT/PTO 1 1 DEC 2001

December 11, 2001

BOX PCT

Honorable Commissioner of Patents and Trademarks Washington, D.C. 20231

Attorney Docket No 2260/50666

Transmittal Letter to the United States Re: Designated/Elected Office (DO/EO/US) Concerning a Filing Under 35 U.S.C. §371

> International Application No.: PCT/JP/04226 International Filing Date: 28 June 2000

Priority date claimed: 29 June 1999 Priority application number: 11-183345

Inventorship: Toshio KASAMA

> Mitsuru NOTO Susumu OGURO Isao HANAZOME Rena TATEKAWA

OPHTHALMIC OINTMENT FOR TREATING Title:

INFECTIVE EYE DISEASES

Enclosed herewith for entering the national stage in the United States is the above-referenced international application.

APPLICANT WISHES THAT THE ANNEXES TO THE INTERNATIONAL PRELIMINARY EXAMINATION REPORT REPLACE THE APPROPRIATE PAGES OF THE CLAIMS AS FILED.

- [X]This is a FIRST submission of items concerning a filing under 35 U.S.C. §371.
- [] This is a SECOND or SUBSEQUENT submission of items 2. concerning a filing under 35 U.S.C. §371.
- 3. [] This express request to begin national examination procedures (35 U.S.C. §371(f)) at any time rather than delay examination until the expiration of the applicable time limit set in 35 U.S.C. §371(b) and PCT Articles 22 and 39(1).

INTERNATIONAL APPLN. NO.: PCT/JP/04226 ATTORNEY DOCKET NO.: 2260/50666

- 4. [X] A proper Demand for International Preliminary Examination was made by the 19th month from the earliest claimed priority date.
- 5. [] A copy of the International Application as filed (35 U.S.C. §371(c)(2))
 - a. _____ is transmitted herewith (required only if not transmitted by the International Bureau).
 - b. X has been transmitted by the International Bureau
 - c. ____ is not required, as the application was filed in the United States Receiving Office (RO/US)
- 6. [X] A translation of the International Application into English (35 U.S.C. §371(c)(2)).
- 7. [] Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. §371(c)(3))
 - a. ____ are transmitted herewith (required only if not transmitted by the International Bureau)
 - b. ____ have been transmitted by the International Bureau
 - c. ____ have not been made; however, the time limit for making such amendments has NOT expired
 - d. \underline{X} have not been made and will not be made
- 8. [] A translation of the amendments to the claims under PCT Article 19 (35 U.S.C. §371(c)(3)).
- 9. [X] An oath or declaration of the inventor(s) (35 U.S.C. \$371(c)(4)) is:
 - [X] Attached in the regular manner.
 - [] NOT included, but deferred under P.L. 97-247.

INTERNATIONAL APPLN. NO.: PCT/JP/04226
ATTORNEY DOCKET NO.: 2260/50666

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- 10. [] A translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5))
- 11. [X] An Information Disclosure Statement under 37 CFR 1.97 and 1.98.
- 12. [X] Two Assignments of the invention in favor of the following organization is enclosed for recordation. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.

 TOA PHARMACEUTICAL CO., LTD.
- 13. [X] A FIRST Preliminary Amendment.
 - [] A SECOND or SUBSEQUENT Preliminary Amendment.
- 14. [] A substitute specification.
- 15. [] A change of power of attorney and/or address letter.
- 16. [X] Other items of information:
 - [] Form PCT/RO/101 Request (in English/in French)
 - [] Small Entity Declaration Under 37 C.F.R. 1.27
 - [] Copy of Form PCT/DO/EI/905 (Notification of Missing Requirements)
 - [] _____ Sheets of Formal Drawings
 [] ____ Sheets of Informal Drawings
 - [] The content of the paper and computer readable copy of the attached Sequence Listing, submitted in accordance with 37 CFR §1.821(c) and (e), respectively, are the same.
 - [X] Kindly appoint as associate attorneys (if not already a principal attorney) or agents:

Herbert I. Cantor, Reg. No. 24,392; James F. McKeown, Reg. No. 25,406; Donald D. Evenson, Reg. No. 26,160; Joseph D. Evans, Reg. No. 26,269; Gary R. Edwards, Reg. No. 31,824; and Jeffrey D. Sanok, Reg. No. 32,169

ADDIN NO - DCT/ID/O

10/009476 C13 Rec'd PCT/PTO 1 1 DEC 2001

INTERNATIONAL APPLN. NO.: PCT/JP/04226 ATTORNEY DOCKET NO.: 2260/50666

[X] The total amount due for the filing fee in this case is:

[] Based on Small Entity Status

Total Number of Claims: 11
Total Independent Claims: 1

Basic filing fee, \$890/\$445		\$	890.00
Independent Claims above 3, \$84/\$42 ea		\$	
Total claims in excess of 20, \$18/\$9 ea.		\$	
Multiple dependency penalty, \$280/\$140 .	•	\$	
Declaration surcharge, \$130/65		\$_	0.00
English translation surcharge, \$130		\$	
TOTAL FILING FEE DIE		Ś	890.00

Please forward all communications regarding this application to the undersigned at the letterhead address.

Respectfully submitted

/#erbert I. Cantor Reg. No. 24,392

HIC/tcv

THE COMMISSIONER IS AUTHORIZED TO CHARGE \$890 FOR THE FILING FEE AND \$80 ASSIGNMENT RECORDING FEES AND ANY ADDITIONAL FEES WHICH MAY BE REQUIRED OR CREDIT ANY OVERPAYMENT TO DEPOSIT ACCOUNT NO. 05-1323. THIS FORM IS FILED IN DUPLICATE.

THIS IS A GENERAL AUTHORIZATION EXCLUDING ONLY PAYMENT OF THE ISSUE FEE.

124699947 P1 DEC 2001

Attorney Docket: 2260/50666

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

TOSHIO KASAMA ET AL

Serial No.:

TO BE ASSIGNED

Group Art Unit:

Filed:

CONCURRENT HEREWITH

Examiner:

Title:

OPHTHALMIC OINTMENTS FOR TREATING INFECTIVE

EYE DISEASES

PRELIMINARY AMENDMENT

Commissioner for Patents Washington, D.C. 20231

Sir:

Prior to calculation of the filing fee and prior to examination, please amend the above-identified application as follows:

IN THE SPECIFICATION

Page 1, line 1, cancel "Technical Field" and insert --BACKGROUND OF THE INVENTION--

line 7, cancel "Background Art"

Page 2, line 14, cancel "Disclosure of the invention" and substitute therefor --SUMMARY OF THE INVENTION--

Page 4, line 12, cancel "Best Mode for Carrying Out the Invention" and insert --DETAILED DESCRIPTION OF THE PREFERRED EMBODIMENTS--

Page 11, line 1, cancel "Claims" and insert -- WHAT IS CLAIMED IS:--

IN THE CLAIMS

Please amend Claims 2-5 as follows:

- --2. (Amended) An ophthalmic ointment as claimed in Claim 1, wherein said eye diseases are caused by methicillin-resistant *Staphylococcus aureus* (MRSA).
- 3. (Amended) An ophthalmic ointment as claimed in Claim 1, wherein said eye diseases are caused by methicillin-resistant *Staphylococcus epidermidis* (MRSE).
- 4. (Amended) An ophthalmic ointment as claimed in Claim 2, wherein said infective eye disease is keratitis.
- 5. (Amended) An ophthalmic ointment as claimed in Claim 3, wherein said infective eye disease is keratitis.--

Please insert the following new claims:

- --6. (New) An ophthalmic ointment as claimed in Claim 1, wherein said vancomycin hydrochloride is present in an amount of from 0.1 to 3.0%.
- 7. (New) An ophthalmic ointment as claimed in Claim 6, wherein said vancomycin hydrochloride is present in an amount of from 0.3 to 1.0%.
- 8. (New) An ophthalmic ointment as claimed in Claim 1, further comprising a member of the group consisting of liquid paraffin, white petrolatum, purified lanolin, gelation hydrocarbon, polyethylene glycol,

hydrophilic ointment base, white ointment base, Macrogol, ointment base, simple ointment base, and mixtures thereof.

- 9. (New) An ophthalmic ointment as claimed in Claim 8, further comprising an excipient selected from the group consisting of antiseptics, surfactants, stabilizers, alcohols, esters, oils, and mixtures thereof.
- 10. (New) An ophthalmic ointment as claimed in Claim 9, said antiseptic is selected from the group consisting of parahydroxybenzoate, chlorobutanol, and benzalkonium chloride, said surfactant is selected from the group consisting of polysorbate 80, polyoxyl 40 stearate, and polyoxyethylene hydrogenated castor oil, said stabilizer is selected from the group consisting of sodium edetate, citric acid, and salts thereof, said alcohol is selected from the group consisting of glycerol, lanolin alcohol, and cetanol, said ester is selected from the group consisting of isopropyl myristate, and ethyl linoleate, and said oil is selected from the group consisting of olive oil and triglycerides of middle-chained fatty acids.
- 11. (New) A method of treating infective eye diseases comprising topically administering an effective amount of the ophthalmic ointment of Claim 1.--

IN THE ABSTRACT

Please substitute the abstract submitted herewith on a separate page for theoriginal abstract.

REMARKS

It is respectfully requested that the above amendments be entered prior to calculation of the filing fee and prior to examination. The amendments have been made to place the application in better form for U.S. practice and to round out the coverage to which Applicants are entitled. No new matter has been added.

If there are any questions regarding this amendment or the application in general, a telephone call to the undersigned would be appreciated since this should expedite the prosecution of the application for all concerned.

If necessary to effect a timely response, this paper should be considered as a petition for an Extension of Time sufficient to effect a timely response, and please charge any deficiency in fees or credit any overpayments to Deposit Account No. 05-1323 (Docket #2260/50666).

December 11, 2001

Herbert I. Cantor

Registration No. 24,392

Respectfully submitte

CROWELL & MORING, LLP P.O. Box 14300 Washington, DC 20044-4300 Telephone No.: (202) 624-2500 Facsimile No.: (202) 628-8844

HIC:tev

APPENDIX

IN THE CLAIMS

Please amend Claims 2-5 as follows:

- --2. (Amended) An ophthalmic ointment [for treating infective eye diseases] as claimed in Claim 1, wherein said eye diseases are caused by methicillin-resistant *Staphylococcus aureus* (MRSA)[, containing as an active ingredient from 0.01 to 5.0% of vancomycin hydrochloride.]
- 3. (Amended) An ophthalmic ointment [for treating infective eye diseases] as claimed in Claim 1, wherein said eye diseases are caused by methicillin-resistant *Staphylococcus epidermidis* (MRSE)[, containing as an active ingredient from 0.01 to 5.0% of vancomycin hydrochloride].
- 4. (Amended) An ophthalmic ointment <u>as claimed in Claim 2</u>, wherein <u>said infective eye disease is</u> [for treating] keratitis [caused by MRSA, containing as an active ingredient from 0.01 to 5.0% of vancomycin hydrochloride].
- 5. (Amended) An ophthalmic ointment as claimed in Claim 3, wherein said infective eye disease is [for preventing] keratitis [caused by MRSE, containing as an active ingredient from 0.01 to 5.0% of vancomycin hydrochloride].--

ABSTRACT OF THE DISCLOSURE

Ophthalmic ointments for treating infective eye diseases which are particularly effective against infective eye diseases caused by methicillin-resistant Staphylococcus aureus (MRSA) or methicillin-resistant Staphylococcus epidermidis (MRSE) and contain as the active ingredient from 0.01 to 5.0% of vancomycin hydrochloride. Compared with intravenous administration, topical administration of these ophthalmic ointments is accompanied with no problem of the occurrence of side effects such as renal toxicity and thus enables the maintenance of a therapeutically effective concentration.

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SPECIFICATION

OPHTHALMIC OINTMENT FOR TREATING INFECTIVE EYE DISEASES

5 Technical, Field

The present invention relates to ophthalmic ointments for treating infective eye diseases, and more particularly, to ophthalmic ointments for treating infective eye diseases caused by methicillin-resistant *Staphylococcus aureus* (MRSA) and methicillin-resistant *Staphylococcus epidermidis* (MRSE).

Background Art

Development of antibiotics has been recognized to be a battle against relentlessly emerging resistant strains. In recent years, methicillin-resistant *Staphylococcus aureus* (MRSA) has been attracted significant attention as a new type of multiple drug-resistant bacteria which are responsible for infections in various medical fields. Also, there is growing concern about nosocomial MRSA infection as the number of reported cases of MRSA infection increases every year.

Gram-positive cocci, in particular staphylococci, are by far the most prevalent pathogens of infective eye diseases such as neonatal dacryocystitis, chronic dacryocystitis, conjunctivitis, hordeolum externum, blepharoadenoma, keratitis, corneal ulcer, blepharitis (including blepharitis marginalis), endophthalmitis, orbital cellulitis, Stevens-Johnson syndrome, infections, and postoperative infections (including infections of buckling). Recently, it has been reported that the cases of eye infections caused by methicillin-resistant (MRSA) Staphylococcus aureus or methicillin-resistant Staphylococcus epidermidis (MRSA) are on the increase.

Furthermore, as an intraocular implant to the patients

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suffering from cataract become a popular procedure, postoperative MRSA or MRSE infections have become a matter of considerable concern.

Despite the growing concern over MRSA infection in the field of ophthalmology, no effective ophthalmic ointment has been proposed thus far as a therapeutic formulation of eye infections, especially those caused by MRSA.

Accordingly, it is an objective of the present invention to provide an ophthalmic ointment for treating infective eye diseases, and in particular, to provide an ophthalmic ointment for treating infective eye diseases caused by methicillin-resistant Staphylococcus aureus (MRSA) or methicillin-resistant Staphylococcus epidermidis (MRSE).

Disclosure of the Invention

In view of the above-mentioned objective, one aspect of the present invention provides an ophthalmic ointment for treating infective eye diseases containing as an active ingredient from 0.01 to 5.0% of vancomycin hydrochloride.

Among others, the present invention is particularly directed to an ophthalmic ointment for treating infective eye diseases caused by MRSA or MRSE. More particularly, the present invention provides an ophthalmic ointment for treating infective eye diseases caused by methicillin-resistant *S. aureus* (MRSA) or methicillin-resistant *S. epidermidis* (MRSE) containing as an active ingredient from 0.01 to 5.0% of vancomycin hydrochloride.

As used herein, the term "infective eye diseases" refers to infective diseases including neonatal dacryocystitis, chronic dacryocystitis, conjunctivitis, hordeolum externum, blepharoadenoma, keratitis, corneal ulcer, blepharitis (including blepharitis marginalis), endophthalmitis, orbital cellulitis,

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Stevens-Johnson syndrome, orbital infections, and postoperative infections (including infections of buckling). Among others, the present invention is particularly directed to an ophthalmic ointment for treating or preventing of keratitis caused by MRSA (which may be referred to simply as "MRSA keratitis", hereinafter).

Thus, in a more specific embodiment, the present invention provides an ophthalmic ointment for treating MRSA keratitis containing as an active ingredient from 0.01 to 5.0% of vancomycin hydrochloride. In this regard, the present invention also provides an ophthalmic ointment for preventing MRSA keratitis containing as an active ingredient from 0.01 to 5.0% of vancomycin hydrochloride.

In the first place, the present inventors paid their attention to vancomycin hydrochloride, which is used as the agent of the first choice to treat MRSA infections, in an effort to provide the ophthalmic ointment for treating infective eye diseases in accordance with the present invention. No medical ointment containing vancomycin hydrochloride had been proposed until then and no one had ever conceived of the idea of using vancomycin hydrochloride in ophthalmic ointments.

At that point, the present inventors prepared an ophthalmic ointment containing vancomycin hydrochloride, as the agent of the first choice used to treat MRSA infections, applied the ointment to treat infective eye diseases, especially keratitis caused by MRSA, and discovered that the ointment exhibited excellent efficacy as a therapeutic formulation for treating such infective eye diseases.

30 Thus, the present invention is of absolute novelty in that it provides an ophthalmic ointment containing vancomycin hydrochloride, which no one has ever conceived of using in this

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form.

Vancomycin hydrochloride is little absorbed in the living body when orally administered and is hardly distributed to eyes tissue when intravenously injected. Therefore, maintaining the effective concentration of vancomycin in eye tissue requires a large quantity of solution for bolus intravenous injection, which may cause renal toxicity.

Accordingly, the ophthalmic ointment of the present invention, which is topically available of vancomycin hydrochloride, eliminates the above-mentioned disadvantages and provides a highly effective therapeutic formulation for treating infective eye diseases.

Best Mode for Carrying Out the Invention

In an ophthalmic ointment of the present invention containing vancomycin hydrochloride as an active ingredient, the content (*i.e.*, concentration) of vancomycin hydrochloride is from 0.01 to 5.0%, preferably from 0.1 to 3.0%, more preferably from 0.3 to 1.0%, based on the amount of ophthalmic ointment preparation.

In the course of the study, the present inventors applied the ophthalmic ointment containing vancomycin hydrochloride at a concentration of 0.3% or 1.0%, to corneas of rabbits suffering MRSA keratitis and discovered that the ointment was effective not only in preventing keratitis caused by MRSA keratitis but also in curing the disease.

A preferred ointment base used to prepare the ophthalmic ointment of the present invention may be one that has been used in conventional ophthalmic ointments. In particular, the preferred base may be liquid paraffin, white petrolatum, purified lanolin, gelation hydrocarbon, polyethylene glycol, hydrophilic ointment base, white ointment base, absorptive ointment base,

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Macrogol (Trade Name) ointment base, simple ointment base, and the like.

The ophthalmic ointment of the present invention may contain further conventional excipients other than the ointment base in the range of without affecting the intended functions and stability of vancomycin hydrochloride to be contained. ofsuch excipients include antiseptics such as parahydroxybenzoate, chlorobutanol, benzalkonium chloride and the like; surfactants such as polysorbate 80, polyoxyl 40 stearate, polyoxyethylene hydrogenated castor oil and the like; stabilizers such as sodium edetate, citric acid, and salts thereof; alcohols such as glycerol, lanolin alcohol, cetanol and the like; esters such as isopropyl myristate, ethyl linoleate and the like; and oils such as olive oil and triglycerides of middle-chained fatty acids.

The ophthalmic ointment of the present invention can be produced as follows: if necessary, antiseptics, surfactants, stabilizers, alcohols, esters or oils are blended with an ointment base such as liquid paraffin or white petrolatum placed in a mortar or a mixing machine for ointment to form a mixture. This is followed by addition of vancomycin hydrochloride, and the resulting mixture is mixed until uniform and kneaded to form the ophthalmic ointment. The ointment thus prepared is filled into a bottle or tube for ointment to obtain the ophthalmic ointment containing vancomycin hydrochloride of the present invention.

The ophthalmic ointment containing vancomycin hydrochloride of the present invention obtained in the above-described manner is efficacious against infective eye diseases including neonatal dacryocystitis, chronic dacryocystitis, conjunctivitis, hordeolum externum, blepharoadenoma, keratitis, corneal ulcer, blepharitis (including blepharitis marginalis), endophthalmitis, orbital

cellulitis, Stevens-Johnson syndrome, orbital infection, and postoperative infections (including infections of buckling).

The ophthalmic ointment of the present invention for treating infective eye diseases is particularly effective against those infective eye diseases caused by MRSA or MRSE. Among others, the ophthalmic ointment of the present invention is particularly effective for treating or preventing of keratitis caused by MRSA.

Examples

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The present invention will now be described in detail with reference to specific examples, but it is to be noted that the present invention is not limited by these Examples in any way.

Example 1

20g of liquid paraffin and 79g of white petrolatum were placed in a mortar and were mixed and kneaded until uniform. This was followed by addition of 1g of vancomycin hydrochloride and the resulting mixture was thoroughly kneaded to form a homogenous ophthalmic ointment containing 1% of vancomycin hydrochloride.

Example 2

15g of liquid paraffin and 84g of white petrolatum were placed in a mortar and were mixed and kneaded until uniform. This was followed by addition of 1g of vancomycin hydrochloride and the resulting mixture was thoroughly kneaded to form a homogenous ophthalmic ointment containing 1% of vancomycin hydrochloride.

Example 3

20g of liquid paraffin and 79.7g of white petrolatum were 30 placed in a mortar and were mixed and kneaded until uniform. This was followed by addition of 0.3g of vancomycin hydrochloride and the resulting mixture was thoroughly kneaded to form a homogenous

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ophthalmic ointment containing 0.3% of vancomycin hydrochloride.

Example 4

15g of liquid paraffin and 84.9g of white petrolatum were placed in a mortar and were mixed and kneaded until uniform. This was followed by addition of 0.1g of vancomycin hydrochloride and the resulting mixture was thoroughly kneaded to form a homogenous ophthalmic ointment containing 0.1% of vancomycin hydrochloride.

10 Example 5

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20g of liquid paraffin and 79.97g of white petrolatum were placed in a mortar and were mixed and kneaded until uniform. This was followed by addition of 0.03g of vancomycin hydrochloride and the resulting mixture was thoroughly kneaded to form a homogenous ophthalmic ointment containing 0.03% of vancomycin hydrochloride.

Example 6

15g of liquid paraffin and 82g of white petrolatum were placed in a mortar and were mixed and kneaded until uniform. This was followed by addition of 3g of vancomycin hydrochloride and the resulting mixture was thoroughly kneaded to form a homogenous ophthalmic ointment containing 3% of vancomycin hydrochloride.

Example 7

25 liquid paraffin and 80g of white petrolatum were placed in a mortar and were mixed and kneaded until uniform. This was followed by addition of 5g of vancomycin hydrochloride and the resulting mixture was thoroughly kneaded to form a homogenous ophthalmic ointment containing 5% of vancomycin hydrochloride.

Example 8: Storage Stability Test

The storage stability of ophthalmic ointments containing

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vancomycin hydrochloride obtained in Examples mentioned above was tested.

Each of the ophthalmic ointments was filled in a plastic tube and was stored in a thermostatic bath kept at 25°C or at 30°C. As a stability test, the remaining ratio of vancomycin hydrochloride was measured with the passage of time by high-performance liquid chromatography. In the 2 months stability tests at 25°C or at 30°C, the ophthalmic ointments of the present invention each showed excellent stability.

The results are shown in Table 1 below.

Table 1

Concentration of agents		Remaining Ratio of Vancomycin / HCl			
	Initial	25°C/	25°C/	30°C/	30°C/
		1 month	2 months	1 month	2 months
0.1%	100%	98.3%	97.7%	97.0%	96.4%
0.3%	100%	98.5%	97.1%	97.4%	96.0%
1.0%	100%	98.7%	97.1%	97.7%	96.3%

As can be seen from the results above, the ophthalmic ointments of the present invention each showed excellent stability.

Example 9: Pharmacological Test

1. Methods

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A group of four white rabbits, weighing about 2.5kg, was used for each test. A solution of MRSA for inoculation was prepared by taking the bacteria of MRSA cultured on blood agar with a loop and suspending them in saline (1 loop/lml). In accordance with a method described by Kondo et al (Jpn. Rev. Clin. Opthalmol., 75(1981): 1421), the bacteria were inoculated onto each cornea in 17 spots by injecting the MRSA suspension using a tuberculin syringe having 27G needle. Subsequently, 0.1ml of the

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bacterial suspension were applied to both eyes. The ointment containing vancomycin hydrochloride of the present invention was then applied to the right eyes whereas only the base of the ointment was applied to the left eyes. The ointment and the base were applied 5 times a day for 2 days. The corneas were observed 48 hours after the inoculation.

Four concentrations of vancomycin hydrochloride, namely 0.03%, 0.1%, 0.3% and 1%, were used.

2. Results

In the eyes (left) applied only the base, the formation of abscess-like circular infiltration and strong iritis with fibrin at each needling positions were observed and significant eye mucus suffering from keratitis caused by MRSA was also observed.

In contrast, keratitis was completely prevented in the eyes to which the ointment containing 1.0% or 0.3% of vancomycin hydrochloride was applied (*i.e.*, right eyes).

Further, punctate infiltration was observed only in one or two of the inoculation spots in each of the eyes to which the ointment containing 0.1% of vancomycin hydrochloride (*i.e.*, right eyes) was applied whereas many punctate infiltration as well as partially orbicular infiltration were observed in the eyes to which the ointment with 0.03% of vancomycin hydrochloride (*i.e.*, right eyes) was applied.

In view of the results above, it can be concluded that the ophthalmic ointment of the present invention containing 0.3% or more of vancomycin hydrochloride is capable of completely preventing MRSA keratitis and the ointment may be effective against MRSA keratitis even when the amount of vancomycin hydrochloride is less than 0.3%.

It should be noted that an ophthalmic ointment tends to remain in a conjunctival sac for a prolonged period of time while releasing drug in a sustained manner and the ophthalmic ointment

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of the present invention is considerably more effective as compared to when vancomycin is applied through dropping since it is designed to maintain the concentration of vancomycin in eye tissue higher than the minimum inhibitory concentration (MIC) for a prolonged time.

Industrial Applicability

As has been described thus far, the present invention provides an ophthalmic ointment that is effective against MRSA infective eye diseases in the field of ophthalmology. Considering the fact that no effective therapeutic formulation has ever been proposed in this field, the possible impact of the present invention will be of considerable medical importance.

In particular, intravenous administration of vancomycin requires a large quantity of solution for bolus intravenous injection in order to maintain the effective concentration of vancomycin since vancomycin is hardly distributed to eye tissue. This may lead to various side effects including renal toxicity.

In contrast, the ophthalmic ointment of the present invention is provided in the form of a topical ophthalmic ointment, which no one has ever conceived of, and therefore is capable of avoiding the side effects while maintaining the effective concentration of vancomycin in eye tissue. Accordingly, the ophthalmic ointment of the present invention can be used as a highly effective therapeutic formulation in treating infective eye diseases.

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Claims

- 1. An ophthalmic ointment for treating infective eye diseases, containing as an active ingredient from 0.01 to 5.0% of vancomycin hydrochloride.
 - 2. An ophthalmic ointment for treating infective eye diseases caused by methicillin-resistant *Staphylococcus aureus* (MRSA), containing as an active ingredient from 0.01 to 5.0% of vancomycin hydrochloride.
 - 3. An ophthalmic ointment for treating infective eye diseases caused by methicillin-resistant *Staphylococcus epidermidis* (MRSE), containing as an active ingredient from 0.01 to 5.0% of vancomycin hydrochloride.
 - 4. An ophthalmic ointment for treating keratitis caused by MRSA, containing as an active ingredient from 0.01 to 5.0% of vancomycin hydrochloride.
 - 5. An ophthalmic ointment for preventing keratitis caused by MRSE, containing as an active ingredient from 0.01 to 5.0% of vancomycin hydrochloride.

UTILITY PATENT OR DESIGN SOLE OR JOINT

which is described and claimed in:

CROWELL & MORING, LLP UNITED STATES LETTERS PATENT DECLARATION AND POWER OF ATTORNEY

ATTORNEY'S DOCKET NO.

As a below named inventor, I declare that I believe I am the original, first and sole inventor if only one name is listed at Item 201 below, or a joint inventor if plural names are listed below at Items 201 et. seq. of subject matter which is claimed and for which a patent is sought for the invention entitled:

101	[] the attached specification	tached specification (for declaration not accompanying application papers) tached specification (for declaration not accompanying application papers)					
	and (if applicable) amended on						
102	[] international (PCT) application	No.	filed	and as amended on (if any)			
	I acknowledge the duty to disclost hereby claim the benefit of priori below and have also identified in it for which priority is claimed. I hereby claim the benefit, under part, insofar as the subject matter oby the first paragraph of Title 35, U	se all information known by me to be may, under Title 35, United States Code, § em 103 below any foreign application(s Title 35, United States Code, §120, of ar of any of the claims thereof is not disclos United States Code, §112, I acknowled, Regulations, §1.56 which became avails	aterial to patentability as defined in Title 119, of any foreign application(s) for pate) for patent or inventor's certificate having U.S. application(s) listed in Item 105 bed in the prior U.S. application(s) identifies the duty to disclose all information knows.	nded by any amendment referred to above. 37, Code of Federal Regulations, §1.56. ent or inventor's certificate listed in Item 103 ag a filing date before that of the application elow. If this application is a continuation-ined in Item 105 below in the manner provided own to me to be material to patentability as S. application(s) identified in Item 105 below			
		NY, FILED WITHIN 12 (6 if a Design) NERMITTED IS HEREBY CLAIMED UN	MONTHS PRIOR TO THE FILING DATI DER 35 U.S.C. §119	E OF THIS APPLICATION THE			
	COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED YES NO			
	Japan	JP 11-183345	29/06/99	X			
105		[] CONTINUATION-IN-PART OF PRIOR U.S. APPLICATION	SERIAL NO.	FILED			
POWE!	POWER OF ATTORNEY. As a named inventor, I hereby appoint the following attorney(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:						
	JAMES F. MCKEOWN HERBERT I. CANTOR DONALD D. EVENSON Registration No. 25,406 Registration No. 24,392 Registration No. 26,160						
	JOSEPH D. EVANS GARY R. EDWARDS JEFFREY D. SANOK Registration No. 26,269 Registration No. 31,824 Registration No. 32,169						
SEND	CORRESPONDENCE TO:	P.O. Bo	MORING, L.L.P. 5x 14300	DIRECT TELEPHONE CALLS TO:			
		vvasnington, D	.C. 20044-4300	202-628-8800			

1	nventor(s)	name must include a	at least one unab. I lated first or middle name.	· The state of the	
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Exeventh (and more) coinventors on page 3
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of any patent issue thereon.

SIGNATURE OF INVENTOR 201 Cashir Vieron	SIGNATURE OF INVENTOR 202 M. Note	SIGNATURE OF INVENTOR 203 S. Qgura.
November 5,2001	DATE November 7,2001	DATE November 7,2001
SIGNATURE OF INVENTOR 204 I. Hanazome	SIGNATURE OF INVENTOR 205 R. Tatekawa	SIGNATURE OF INVENTOR 206
November 7,2001	November 7,2001	DATE